2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000001280

Address: City-St-Zip:

NEW LONDON, CT 06320

Entity Name: GLOBAL MARINE SYSTEMS (FEDERAL), INC.

FILED Feb 11, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: PO BOX 21726 FT. LAUDERDALE, FL 33335 **Current Mailing Address: New Mailing Address:** PO BOX 21726 FT. LAUDERDALE, FL 33335 FEI Number: 65-0812615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MITCHELL, ROGER P 1800 ELLER DRIVE **SUITE #212** FT. LAUDERDALE, FL 33316 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MITCHELL, ROGER P Name: Name: 1800 ELLER DRIVE, SUITE 212 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33316 City-St-Zip: Title: PD Title: () Delete () Change () Addition Name: LOFTUS, STEPHEN F Name: 309 N LEE ST Address: Address: ALEXANDRIA, VA 22314 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition CERCONE, CYNTHIA Name: Name: 1800 ELLER DRIVE.SUITE 212 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33316 City-St-Zip: Title: () Delete Title: () Change () Addition DOUGLAS, JOHN A Name: Name: Address: 1735 NEW YORK AVE, N.W STE 700 Address: City-St-Zip: WASHINGTON, DC 20006 City-St-Zip: Title: () Delete Title: () Change () Addition COLE, BERNARD Name: Name: 22 HENDERSON RD Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CYNTHIA CERCONE VT 02/11/2002